

# ACE 2017 OPERATOR REGISTRATION

October 12 - 14, 2017 • Myrtle Beach, SC

Embassy Suites at Kingston Plantation • 800-876-0010



## Kick Up Your Spurs at ACE 2017

### REGISTRATION TYPES

**Operator** - Employee of a vending company, either full or part-time, including government attendees.

**Guest** - A spouse/significant other/adult or child age 13 or older, accompanying an operator, who is NOT in the vending industry and is NOT a customer. This option may NOT be used by a co-worker or an associate within the industry.

**Minor** - Everyone aged 2-12 years, whether or not the person is employed by the company.

**PLEASE NOTE** - No refunds after September 12th. Refunds prior to will be subject to a \$15 processing fee.

**Registration Type:** **Regular Rate:**  
(Postmarked or fax-dated Aug. 12 or after )

Operator Attendee (Full convention)	\$99/person
GUEST of Operator Attendee	\$50/person
Minor (everyone aged 2-12)	\$10
Leadership Management Training Thurs. 10/12 - 1pm - 6pm (does NOT include Full convention )	\$99
OSC Education, Fri. 10/13(8am-12pm) (does NOT include Full convention)	\$99

### REGISTRATION OPTIONS:

**ONLINE** - preferred method - [www.atlanticcoastexpo.com](http://www.atlanticcoastexpo.com)  
fax - 919-249-1394  
mail - ACE, PO Box 4407, Cary, NC 27519-4407  
email to - [info@atlanticcoastexpo.com](mailto:info@atlanticcoastexpo.com)

### DETERMINE TOTAL FEE AND PAYMENT - Refunds issued by check only.

Registration Fees \$ \_\_\_\_\_  
Special Programs \$ \_\_\_\_\_  
Registration Total \$ \_\_\_\_\_

**Preferred method of payment is by check - make checks payable to ACE.**  
**Pay by Credit Card? Please complete an ACE Credit Card Authorization Form**

### READ AND SIGN WAIVER

The undersigned in consideration of his/her registration at ACE 2017, releases, holds harmless and discharges the associations, sponsors, management staff and their agents from any and all actions, claims and demands which may arise out of an accident, casualty or occurrence during said convention. The planners/sponsors of this function claim no liability for the acts of any suppliers to this meeting or for safety of any attendee while in transit to and from this event. Your signature below acknowledges acceptance of this provision of registration for all those listed on this registration form.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature (required) \_\_\_\_\_

STEP 1 - When did you attend ACE last? \_\_\_\_\_

### STEP 2. COMPANY INFORMATION

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Main Contact Name: \_\_\_\_\_  
Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### STEP 3. REGISTRATION DETAILS

Are you a current member of a state association?  
 YES. Which one? \_\_\_\_\_  NO  
Are you attending the Fri. ACE 2017 "Country & Western Ho Down Party"?  
 YES. # \_\_\_\_\_  NO  
Are you attending the Sat. Morning "ACE Trailblazers Awards Breakfast"?  
 YES. # \_\_\_\_\_  NO  
Are you attending the Sat. Afternoon "Corn Hole Party by the Watering Hole"?  
 YES. # \_\_\_\_\_  NO

### STEP 4. EDUCATION - FREE SESSIONS (included in ACE Registration)

Select Educational Sessions:  
# \_\_\_\_\_  Legislative Update - 9am Friday (60 min)  
# \_\_\_\_\_  Vending Session - 10:15m Friday (75 min)  
# \_\_\_\_\_  MicroMarkets Session - 11:45am Fri. (105 min.)

### STEP 5. INDIVIDUAL REGISTRATION

Please photocopy this form for more than FOUR registrants - MEMBER TYPE required:

**Name** \_\_\_\_\_  
 Operator  Guest  Minor  
Email: \_\_\_\_\_  
**Name** \_\_\_\_\_  
 Operator  Guest  Minor  
Email: \_\_\_\_\_  
**Name** \_\_\_\_\_  
 Operator  Guest  Minor  
Email: \_\_\_\_\_  
**Name** \_\_\_\_\_  
 Operator  Guest  Minor  
Email: \_\_\_\_\_

### STEP 6. SPECIAL PROGRAMS REGISTRATION - LIMITED SEATING

**O Leadership/Management Education - Oct. 12 - 1:00pm - 6:00pm \$99**  
Cost \$75/attendee, # \_\_\_\_\_ includes materials.

*Wrangle, Wrestle, and Rope Up the Potential in your People with "The Vibrant Coaching Toolbox" taught by Nicole Greer, PPCC. With the responsibilities of roping, riding, and wrangling the marketplace, Cowboys and Cowgirls must lead A VIBRANT LIFE pulsating with energy and purpose. Every ranch hand is responsible for delivering talents to the organization. The S.H.I.N.E. Coaching Methodology™ is a plan for goal setting through harnessing strategies, systems, and smarts. This program aims to release individual's talents through learning and applying coaching technique. The Vibrant Coaching Toolbox is an interactive, up and moving around session...Yeehaw! Attendees will learn to coach others to do Self-Assessment, take a hard look at Habits in the Work Place, explore what it really means to Be in Integrity, learn to Coach Others to Create Next Right Steps, and Increase Your Team's Energy.*

**Name(s)** \_\_\_\_\_  
Email: (s) \_\_\_\_\_  
**Name(s)** \_\_\_\_\_  
Email: (s) \_\_\_\_\_

**O OSC Education Session - Oct. 13 - 8:00am - 12:00pm \$99**

*"Put Your Pot on the Fire" and Attend this FOUR hour session led by coffee expert Michael Tomkins. Topics include: Learning how to smell/taste/brew, learn about the supply chain, learning extraction technology and teach others how to do the same. Learn origins, quality control, blended recipes and roasting. All that in FOUR Hours, PARTNER!*

Cost \$75/attendee, # \_\_\_\_\_ includes materials  
**Name(s)** \_\_\_\_\_  
Email: (s) \_\_\_\_\_  
**Name(s)** \_\_\_\_\_  
Email: (s) \_\_\_\_\_

**O ACE Trailblazers Award BREAKFAST-October 14: 7:30am-9:30am. NO CHARGE**  
*FREE to conference attendees. Special annual awards to top vendors and suppliers of the year with Keynote Speaker - Keni Thomas (Nashville Country Music Star & Army Ranger in Black Hawk Down Mission with an amazing story!)*  
# \_\_\_\_\_ attending



**Atlantic Coast Exposition (ACE)**  
P.O. Box 4407, Cary, NC 27519-4407 - Phone: (919) 387-1221, Fax: (919) 249-1394  
[www.atlanticcoastexp.com](http://www.atlanticcoastexp.com)

**CREDIT CARD CHARGE AUTHORIZATION FORM – FAX to 919-249-1394**  
**The credit card form must be filled out completely, or payment will be declined**

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_



(CIRCLE CARD TYPE or write choice here \_\_\_\_\_)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

**V-Code (3 digits)** \_\_\_\_\_  
(Back of card, Amex is 4-digit code on front of card)

Name on Credit Card: \_\_\_\_\_

Billing Address of Credit Card: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Charge Amount \$ \_\_\_\_\_ Item Purchased: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

**ACE Tax ID # 56-6062858**